

(Rev. 4/97)

**FORM TO BE USED BY A PRISONER IN FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983**

**UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE**

Joel Lee Smith

(Enter above the full name of the plaintiff in this action)

V.

WARDAN TOM CARROL

ET

And All

(Enter above the full name of the defendant(s) in this action)

06 - 464



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IDP

I. Previous lawsuits

A. Have you begun other lawsuits in state or federal courts dealing with the same facts involved in this action or otherwise relating to your imprisonment?
YES [] NO [☒]

B. If your answer to A is yes, describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).

1. Parties to this previous lawsuit

Plaintiffs N/A

Defendants N/A

2. Court (if federal court, name the district; if state court, name the county)

N/A

3. Docket number N/A

4. Name of judge to whom case was assigned N/A

5. Disposition (for example: Was the case dismissed? Was it appealed?
Is it still pending?)

N/A

6. Approximate date of filing lawsuit N/A

7. Approximate date of disposition N/A

II. A. Is there a prisoner grievance procedure in this institution? Yes ☒ No ☐

B. Did you present the facts relating to your complaint in the state prisoner
grievance procedure? Yes ☒ No ☐ Filed on July 16, 06

C. If your answer is YES,

1. What steps did you take? Explained the problem of un-
sanitary and inhuman sleeping on floor is

2. What was the result? Never recieved a response

D. If your answer is NO, explain why not N/A

E. If there is no prison grievance procedure in the institution, did you complain to
prison authorities? Yes ☐ No ☐

F. If your answer is YES,

1. What steps did you take? N/A

2. What was the result? N/A

III. Parties

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of Plaintiff Joel Lee Smith
 Address 1181 Paddock Rd Smyrna Del 19977

(In item B below, place the full name of the defendant in the first blank, his official position in the second blank, and his place of employment in the third blank. Use item C for the names, positions, and place of employment of any additional defendants.)

B. Defendant Tom Carrol is employed as WARDEN
 at Delaware Corrections

C. Additional Defendants ET And All

IV. Statement of Claim

(State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheet if necessary.)

I was put in a cell that was dirty, ants and
spiders crawling on the floor where you sleep on
the floor with no Bunk or anything to raise you
off the floor and you can't in anyway clean
your cell, Very unsanitary and inhuman this was
in Building 18 C-L-1

V. Relief

(State briefly exactly what you want the court to do for you. Make no legal arguments.
Cite no cases or statutes.)

If it pleases the court I respectfully request that relief
be granted by insuring that these injustices stop occurring as
they so often do. The environment in which I was forcibly
placed was not only distressing, but potentially dangerous
due to infectious diseases. I suffered severe mental and

over →

Signed this _____ day of _____, 2006

Joel Lee Smith
(Signature of Plaintiff)

I declare under penalty of perjury that the foregoing is true and correct.

Date

Joel Lee Smith
(Signature of Plaintiff)

IM Joel Smith
SBI# 515785 UNIT 17 A-u-11
DELAWARE CORRECTIONAL CENTER
1181 PADDOCK ROAD
SMYRNA, DELAWARE 19977

Clerk
U.S. District Court
J. Caleb Boggs Federal Building
Lock Box 18
844 N. King St.
Wilmington, Del.
19801

